



## PART B - FEE(S) TRANSMITTAL

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22509 7590 05/04/2004  
MICHAEL E. KLICPERA  
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Michael E. Klicpera (Depositor's name)  
Michael E. Klicpera (Signature)  
05/10/2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/733,563	12/08/2000	Peter Baruth	70762.01	3223

TITLE OF INVENTION: METHOD AND COUPLING APPARATUS FOR FACILITATING AN VASCULAR ANASTOMOSES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/04/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
JACKSON, GARY	9731	606-153000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Michael E. Klicper

2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent); ☒ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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Michael E. Klicpera 05/10/2004  
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PAGE 1H \* RCVD AT 5/11/2004 11:25:14 AM (Eastern Daylight Time) \* SVR:USPTO-EFXRF-2/1 \* DNS:7464000 \* CSID: \* DURATION (mm:ss) 00:52

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